## UTILITY PATENT APPLICATION TRANSMITTAL UNDER 37 CFR 1.53(b)

First Named Inventor (or Application Identifier):

ATTORNEY DOCKET 82604HEC

Customer No. 01333

Commissioner for Patents **Box Patent Application** Washington, D.C. 20231

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Date: <u>December 12, 2001</u> aut Unit . 1774 Sugg. class: 428/195



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Enclosed are:	<del> </del>			<del></del>	
1. X Specification			6. X Assignment of the invention to		
^				n Kodak Company	
2. Sheet(s) of drawing(s)			7. Certified copy of a priority		
3. X Information Disclosure Statement Under 37 CFR 1.97.			8. document. Associate Power of Attorney		
4. Combined Declaration for Patent Application and Power of Attorney:					
4a. X New					
4b. Copy from a prior application (37 CFR 1.63(d) (for continuation/divisional with Box 11 completed)					
Incorporation by Reference (useable if Box 4h is			9. Deletion of Inventor(s).		
checked) The entire disclosure of the prior application, from which a copy of the oath or declaration is supplied under Box 4b.			Signed statement attached deleting inventor(s) named		
The state of the s			in the prior application, see 37 CFR 1.63(d)(2) and		
is considered as being part of the disclosure of the accompanying 1.33(b).					
application and is hereby incorporated by reference therein.					
10. If a 111A application prior to examination of the above-identified application, amend the specification at Page 1, after the title, by inserting the following:					
after the title, by inserting the following: CROSS REFERENCE TO RELATED APPLICATION					
Reference is made to and priority claimed from U.S. Provisional Application Serial No.					
filed, entitled.					
If a CONTINUING APPLICATION, check appropriate box and supply the requisite information:					
11. Continuation Divisional Continuation-in-part (CIP) of prior application No:					
12. X Please address all written communications to Paul A. Leipold, Patent Legal Staff,					
Eastman Kodak Company, 343 State Street, Rochester, NY 14650-2201.					
Please Direct all telephone calls to Harold E. Cole at (585) 722-9225.					
The filing fee has been calcula	ted as shown below:	`	,		
FOR:	NO. FILED	NO. EXTRA	RATE	FEE	
BASIC FEE				\$ 740	
TOTAL CLAIMS	19 - 20 =	0	x 18 =	\$ 0	
INDEPENDENT CLAIMS	1 - 3 =	0	x 84 =	\$ 0	
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Harold E. Cole/cak

Telephone: (585) 722-9225 Facsimile: (585) 477-1148

Attorney for Applicants

Registration No. 23,014